

2004-05 Cal Grant Application Correction Form

California Student Aid Commission



Due to incomplete or inaccurate information provided on your Cal Grant application you have either been found ineligible for a Cal Grant award, or your eligibility has been placed on hold. **If you wish to receive further consideration, you must complete this form to be considered for priority processing and mail or fax it to the California Student Aid Commission (Commission) by the close of business, May 14, 2004.** The *Information You Can Use* sheet lists all of the reasons why an application may be placed on hold. Refer to your notification letter for the specific reason why your application was suspended. Please find that reason on the *Information Sheet*, review the explanation, then complete and return this form. If mailing the form, we suggest you obtain a \$0.90 U.S. Postal Service Certificate of Mailing to prove you mailed the form on time. Fill in all blanks, including name, address and social security number.

A. Name and Phone: Attach a photocopy of your drivers license if you are correcting the way your name appears on your notification letter.

Last	First	MI	Phone
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B. Permanent Mailing Address

Number	Street	Apt. No.	City	State	Zip Code
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C. Social Security Number (SSN): Attach a copy of your social security card if the number on your notification letter is incorrect.

SSN

D. Updated Information: Review your most recent Student Aid Report (SAR) to make sure that document also reflects your correct information.

Legal State of Residence

Should match question #18 on your SAR. Students who will not be 18 years of age by the award deadline should list their parent's state of residency on their SAR in question #67.

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State of Legal Residence

What date were you considered a California resident?

M	M	Y	Y	Y	Y
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Will you have a Bachelor's (four-year college) degree by July 1, 2004?

<input type="checkbox"/>	<input type="checkbox"/>
Yes	No

E. Fall 2004 College of Attendance: If you are not sure where you will attend, list the college you will most likely attend.

College Name	Living Arrangements:
	<input type="checkbox"/> On-campus <input type="checkbox"/> Off-campus <input type="checkbox"/> With parents or relatives

Check your grade level at this college for the 2004-05 school year:

List the grade level your college will consider you at the beginning of the 2004-05 school year. For example, if your college will consider you a sophomore level student, even if you have been in college for more than two years, list college sophomore.

- ☐ College Freshman (1st year)
- ☐ College Sophomore (2nd year)
- ☐ College Junior (3rd Year)
- ☐ College Senior (4th year or higher)
- ☐ College Graduate Student (beyond undergraduate)

F. High School Most Recently Attended Information

Date Began 9th Grade: _____	
High School Graduation Date: _____	
Date of GED Completion: _____	Highest Grade Completed: 9 10 11 12 (circle one)

G. Student Certification

I certify that the information completed on this form is accurate to the best of my knowledge. By my signature I am requesting reconsideration in the state Cal Grant Program and acknowledge that this information and my SAR information will be used to determine my eligibility for a 2004-05 year Cal Grant award. I understand that this document must be received in your office by the close of business Friday, **May 11, 2004.**

Student Signature	Date
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*Apply tape along entire long edge to secure
(Do not staple)*

**Receipt
Deadline:
May 14, 2004**

Unable to
deliver
without
postage

**California Student Aid Commission
Grant Program Processing Section
P.O. Box 419028
Rancho Cordova, CA 95741-9028**

Fold here

Fold Here
(Do not Staple)

Did you remember to:

- Complete every question and sign this form?
- Obtain a \$0.90 U.S. Postal Service Certificate of Mailing?
- Check your SAR for complete accuracy?
- Note our Fax number: (916) 526-8002
- Submit this form so it can be received by May 14, 2004